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COVER LETTER

TO: Registration Section Division of Corporations

Muirfield USA, LLC

SUBJECT:

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Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Tanya Kramer

Name of Person

.

THK Consulting LLC

Firm/Company

2200 Benjamin Franklin Parkway, Suite E1805

Address

Philadelphia, PA 19130

City/State and Zip Code

tanya.kramer@thkconsult.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Tanya Kramer	267 4393177
Name of Person	Area Code & Daytime Telephone Number
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303
Enclosed is a check for the follow	ving amount: \$55 Filing Fee & Certified Copy

INHS18 (2/14)

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

i. N	ame of the limited liability company:	LLC	<u> </u>		
2. (a)		ſ	b)		
()	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	`	N	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
	2200 Benjamin Franklin Parkway, Suite E1805		2200 Benja	min Franklin Parkway, Suite E1805	
	Philadelphia, PA, 19130		Philadelphi	a, PA, 19130	
	07-11-2011 —		L110000845	93	
3.	Date of filing/registration in Florida	 4.		Document number	
5. (a	Frank Gutta				
J. (a	Registered Agent and Registered Office shown on the records of	of the Florid	a Dept. of State	:	
	Registered Office Address (MUST BE FLORIDA STREET	TADDRES	<u>S1</u>		
	430 Sawgrass Corp Parkway, Suite 310				
	Sunrise, F	33325			
(b)	Tanya Kramer Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	ed Office a	ddress:	2021 FED	1
	NEW Registered Office Address:	<u>. </u>	,,		
	10321 El Paraiso PL, Delray Beach				,1
	Delray Beach, F	FL		PH12: 2	3
agent was/w the ar Sign I here provis the ob to me notific	limited liability company is not organized under the la c or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited la cere authorized by an affirmative vote of the members ticles of organization or the operating agreement of the ature of a member or authorized representative of a member eby accept the appointment as registered agent and age is of all statutes relative to the proper and complet bigations of my position as registered agent as provid refy reflect a change in the registered office address, the address of this change.	liability c s of the lir he limited Manog- For <u>and</u> gree to acc le perform	ompany, it is nited liability liability com aran Tharnoth <u>1 on behalf of.</u> t in this capa fance of my a Chanter 605	rida, it is hereby confirmed that after the I the business office of the registered hereby confirmed that the change(s) company or as otherwise provided in pany. iram <u>JTC Services (Mauritius) Limited as trustee of T</u> <u>Printed or typed name of signee</u> <u>Muirfield Trustector</u> <i>City. I further agree to comply with the</i> <i>futies, and I am familiar with and accept</i> <i>F.S. Or. if this document is being filed</i>	he ;1
Signat	ure of Registered Agent				

Division of Corporations• P.O. Box 6327• Tallahassee, FL 32314 FILING FEE: \$25.00

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